



Modalities of Communication Statement (Version 03.0)

Date of submission:		01/02/2019		
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS				
Title of the project/programme of activities:		Huaneng Tongliao Kailu Jianhua Wind Farm Project		
Project/programme of activities reference number: (if available)		6454		
SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES				
Notes: • Sole Focal Point authority - An authorized signatory of <u>ONLY the entity listed below is required</u> to sign for communication related to the corresponding scope of authority. • Shared Focal Point authority - An authorized signatory <u>ANY of the entities listed below is required</u> to sign for communication related to the corresponding scope of authority. • Joint Focal Point authority - Authorized signatories of <u>ALL entities listed below are required</u> to sign for communication related to the corresponding scope of authority.				
Name of entity: Huaneng Tongliao Wind Power Co., Ltd.				
Address: Floor 10 and 11, Huaneng Building, No.23 A, Fuxing Road, Haidian District 100036 Beijing China				
This entity is nominated as a focal point with the authority to:		Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding of CER				X
(b) Communicate in relation to requests for addition and/or voluntary withdrawal of project participants and focal points, as well as changes to company names, legal status, contact details and specimen signatures		X		
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above		X		
Contact details (primary authorized signatory):		Mr. ☒ Ms. ☐		
Last name: Liu		Telephone 1:		
First name: Ruixuan		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Is this entity changing its name?		No		
Former entity name, if applicable:				
Is this entity also a project participant?		Yes		
If the entity is also a project participant, do the same signatories represent it in its project participant role?		Yes		
Name of entity: Carbon Rooster Advisory Services B.V.				
Address: Keern 227 1689PB 1689PB Hoorn Netherlands				
This entity is nominated as a focal point with the authority to:		Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding of CER				X

(b) Communicate in relation to requests for addition and/or voluntary withdrawal of project participants and focal points, as well as changes to company names, legal status, contact details and specimen signatures				
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above				
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐			
Last name: Haan	Telephone 1:			
First name: Albert	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature:		Date (dd/mm/yyyy):		
Is this entity changing its name?		No		
Former entity name, if applicable:				
Is this entity also a project participant?		Yes		
If the entity is also a project participant, do the same signatories represent it in its project participant role?		Yes		